COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. X Print your name and address on the reverse Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece. or on the front if space permits. D. Is delivery address different from from 17 1. Article Addressed to: If YES, enter delivery address below: Granite Construction Company PO Box 30429 Salt Lake City, Utah 894130 3. Service Type ☐ Express Mail □ Certified Mail ☐ Registered ☐ Return Receipt for Merchandise Mall Insured Mall □ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 8-28-12 M1003/0087 2. Article Number 7011 0110 0001 3568 0185 (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1546

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Sender: Please print your name, address, and ZIP+4 in this box

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